



## REGISTRATION FORM

PLEASE CLEARLY MARK 'X' NEXT TO THE ACTIVITY YOU WISH TO BOOK AND RETURN TO THE SCHOOL OFFICE OR VIA EMAIL TO [theoffice@wingateschool.com](mailto:theoffice@wingateschool.com)

DAY	ACTIVITY	LOCATION/STAFF	Mark X
MONDAY	YR 5 – 9 TENNIS COACHING 3.45-4.45PM	PITCH – MR VAQUERO	
	YR 1 – 9 SOCCER CLUB 3.45-4.45PM	PITCH – MR SMITH	
TUESDAY	RECEPTION – YR 4 TENNIS COACHING 3.45-4.45PM	PITCH – MR VAQUERO	
	YR 1 – 9 MULTI SPORTS: INCLUDES DODGEBALL, CRICKET, TOUCH RUGBY AND ROUNDERS ETC... 3.45-4.45PM	PITCH – MR SMITH	
WEDNESDAY	YR 5 – 9 TENNIS COACHING 3.45-4.45PM	PITCH – MR VAQUERO	
	YR 1 – 9 SOCCER CLUB 3.45-4.45PM	PITCH – MR SMITH	
THURSDAY	RECEPTION – YR 4 TENNIS COACHING 3.45-4.45PM	PITCH – MR VAQUERO	
	YR 1 – 9 MULTI SPORTS: INCLUDES DODGEBALL, CRICKET, TOUCH RUGBY AND ROUNDERS ETC... 3.45-4.45PM	PITCH – MR SMITH	

I have read and agree to the terms and conditions of the Wingate School After-school Enrichment Programme

Parents full name: \_\_\_\_\_

NIE number of Parent: \_\_\_\_\_

Students name: \_\_\_\_\_

Class: \_\_\_\_\_

Medical Issues: \_\_\_\_\_

Students name: \_\_\_\_\_

Class: \_\_\_\_\_

Medical Issues: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_